

<b>1 - GENERAL CRASH INFORMATION</b>  SPACE USED FOR BARCODE	AGENCY NAME AND OR: <b>NEOSHO POLICE DEPARTMENT - MO0730300</b>
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LEFT THE SCENE	DRIVER NO.	CLEARED	CRASH CLASSIFICATION	PROPERTY DAMAGE ONLY	NO. INJURED	NO. KILLED	REPORT / CASE / INCIDENT NUMBER
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/>	0	0	0616-121

NO. VEH INV	CRASH DATE	CRASH TIME (MIL)	NOTIFIED DATE	TIME NOTIFIED (MIL)	INVESTIGATION DATE	TIME ARRIVED (MIL)	INVEST. AT SCENE
2	06-12-2016	1459	06-12-2016	1459	06-12-2016	1459	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

CRASH TYPE	ROADWAY	NON-COLLISION			COLLISION INVOLVING			DIRECTIONAL ANALYSIS FOR IMPACT WITH MOTOR VEHICLE		
	<input checked="" type="checkbox"/> On Roadway <input type="checkbox"/> Off Roadway	<input type="checkbox"/> Overturning <input type="checkbox"/> Fire / Explosion <input type="checkbox"/> Immersion <input type="checkbox"/> Jackknife	<input type="checkbox"/> Fell/Jumped From MV <input type="checkbox"/> Cargo / Equip Loss / Shift <input type="checkbox"/> Other Non-Collision	<input type="checkbox"/> Animal <input type="checkbox"/> Pedalcycle <input type="checkbox"/> Fixed Object <input type="checkbox"/> Other Object <input type="checkbox"/> Pedestrian	<input type="checkbox"/> Railway Vehicle <input type="checkbox"/> Animal Drawn Veh / Animal Ridden Trans. <input checked="" type="checkbox"/> Motor Vehicle in Transport <input type="checkbox"/> Parked Motor Vehicle <input type="checkbox"/> Working Motor Vehicle	<input type="checkbox"/> Front to Front <input type="checkbox"/> Front to Rear <input type="checkbox"/> Rear to Rear <input type="checkbox"/> Rear to Side	<input type="checkbox"/> Angle <input type="checkbox"/> Sideswipe (Same Dir.) <input type="checkbox"/> Sideswipe (Opp. Dir.) <input type="checkbox"/> Falling / Shifting Cargo (Set in motion by MV)	<input type="checkbox"/> Other (Explain) <input type="checkbox"/> Unknown (Explain)		

**COMMERCIAL MOTOR VEHICLE INVOLVEMENT CRITERIA - Answer the following to determine if the "Commercial Vehicle" fields in Section 7G must be completed.**

1. Does this crash involve any of the following? 1a. A person fatally injured; OR 1b. A person transported for medical attention; OR 1c. A vehicle towed due to disabling damage.	2. Examine each vehicle to determine if it is a commercial vehicle based upon the following: 2a. A truck / cargo van with GVWR / GCWVR of more than 10,000 lbs; OR 2b. A motor vehicle with seating for 9 or more including driver; OR 2c. A vehicle with a hazardous materials placard.
<input checked="" type="checkbox"/> No - No commercial vehicle fields need completion. <input type="checkbox"/> Yes - Go to number 2.	<input type="checkbox"/> No - No commercial vehicle fields need completion. <input type="checkbox"/> Yes - Complete Section 7G for appropriate vehicle.

EVIDENTIARY PHOTOS TAKEN	BY WHOM	AVAILABLE FROM
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Investigating Agency
RECONSTRUCTION	BY WHOM	AVAILABLE FROM
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Investigating Agency

**2 - LOCATION**

COUNTY	MUNICIPALITY	BEAT / ZONE	TRP/DIST/PCT	GPS COORDINATES (DD MM SS.S FORMAT)		
NEWTON	NEOSHO	CR	NSW	LAT: N	LONG: W	NA

ON	RDWY. DIR	DISTANCE FROM	LOCATION	INTERSECTING
MO HIGHWAY 60	W	<input checked="" type="checkbox"/> NA ____ Feet ____ Miles	<input type="checkbox"/> After <input type="checkbox"/> NA <input type="checkbox"/> Before <input checked="" type="checkbox"/> At	CST LUSK DR
SPEED LIMIT	ROAD MAINTAINED BY			
45	<input checked="" type="checkbox"/> State <input type="checkbox"/> County <input type="checkbox"/> Municipal <input type="checkbox"/> Private Property <input type="checkbox"/> Other			
		SPEED LIMIT	INT. DIR	GEO-CODE
		25	N	NA

TRAFFICWAY	ROAD ALIGNMENT
<input type="checkbox"/> One-Way <input checked="" type="checkbox"/> Two-Way; Not Divided <input type="checkbox"/> Two-Way; Divided; Unprotected Median <input type="checkbox"/> Two-Way; Divided; Positive Median Barrier <input type="checkbox"/> Other <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/> Straight <input type="checkbox"/> Curve <input type="checkbox"/> Unknown (Explain)
ROAD PROFILE	
<input checked="" type="checkbox"/> Level <input type="checkbox"/> Downhill <input type="checkbox"/> Dip <input type="checkbox"/> Uphill <input type="checkbox"/> Hillcrest <input type="checkbox"/> Unknown (Explain)	

INTERSECTION TYPE	ROAD CONDITION
<input type="checkbox"/> NA <input checked="" type="checkbox"/> 4-way Intersection <input type="checkbox"/> Y-Intersection <input type="checkbox"/> 5-way / More <input type="checkbox"/> T-Intersection <input type="checkbox"/> Roundabout <input type="checkbox"/> Other (Explain)	<input type="checkbox"/> Dry <input type="checkbox"/> Snow <input type="checkbox"/> Slush <input type="checkbox"/> Standing Water <input checked="" type="checkbox"/> Wet <input type="checkbox"/> Ice / Frost <input type="checkbox"/> Mud / Dirt <input type="checkbox"/> Moving Water <input type="checkbox"/> Sand / Gravel <input type="checkbox"/> Unknown (Explain) <input type="checkbox"/> Other (Explain)

ROAD SURFACE	WEATHER CONDITION
<input type="checkbox"/> Concrete <input type="checkbox"/> Brick <input type="checkbox"/> Dirt / Sand <input type="checkbox"/> Cobblestone <input checked="" type="checkbox"/> Asphalt <input type="checkbox"/> Gravel <input type="checkbox"/> Multi-Surface <input type="checkbox"/> Unknown (Explain)	<input type="checkbox"/> Clear <input checked="" type="checkbox"/> Rain <input type="checkbox"/> Sleet / Hail <input type="checkbox"/> Fog / Mist <input type="checkbox"/> Cloudy <input type="checkbox"/> Snow <input type="checkbox"/> Freezing (Temp) <input type="checkbox"/> Severe Crosswind <input type="checkbox"/> Other (Explain) <input type="checkbox"/> Unknown (Explain)

**LIGHT CONDITION**

Daylight  Dark-Lighted  Dark-Unlighted  Dark-Unknown Lighting  Other (Explain)  Unknown (Explain)

**3 - DAMAGE TO PROPERTY OTHER THAN VEHICLES**  None

LIST OWNER'S NAME & ADDRESS, DESCRIPTION OF PROPERTY, AND DAMAGE.  MoDOT  County  Municipality

**4 - WITNESS**  None Identified  Additional Witnesses In Narrative

NAME	ADDRESS (Street, City, State, Zip)	PHONE NUMBER

**5 - PEDESTRIAN**  NA  Law Enforcement Officer  Other Emergency Services Personnel  MoDOT Worker  Other Trafficway Worker  Other Pedestrian

NO.	NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip)	PHONE NUMBER

DATE OF BIRTH	SEX	STRUCK BY VEH #:	INJ	TRANS-PORT	SAFETY DEVICES	LOCATION
						<input type="checkbox"/> On Roadway <input type="checkbox"/> In Driveway Access <input type="checkbox"/> On Median / Crossing Island <input type="checkbox"/> On Sidewalk <input type="checkbox"/> Off Roadway <input type="checkbox"/> Unknown

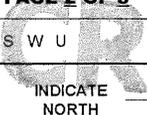
CROSSING ROAD	OTHER ACTIONS	SCHOOL INFO.
<input type="checkbox"/> With Signal <input type="checkbox"/> Against Signal <input type="checkbox"/> No Signal <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/> NA / None <input type="checkbox"/> Getting On / Off Vehicle <input type="checkbox"/> Standing / Lying / Sitting In Trafficway <input type="checkbox"/> Pushing / Working On Vehicle <input type="checkbox"/> Behind / In Front of Parked / Stopped Veh.	<input checked="" type="checkbox"/> NA <input type="checkbox"/> Going To / From School <input type="checkbox"/> Getting On / Off School Bus <input type="checkbox"/> Both Of The Above <input type="checkbox"/> Unknown (Explain)

PROBABLE CONTRIBUTING CIRCUMSTANCES	DISTRACTED / INATTENTIVE CODE(S)	ALCOHOL USE
<input type="checkbox"/> None <input type="checkbox"/> Failed To Yield <input type="checkbox"/> Distracted / Inattentive <input type="checkbox"/> Alcohol <input type="checkbox"/> Drugs <input type="checkbox"/> Vision Obstructed (Explain) <input type="checkbox"/> Physical Impairment (Explain) <input type="checkbox"/> Other (Explain) <input type="checkbox"/> Unknown (Explain)	<input checked="" type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown

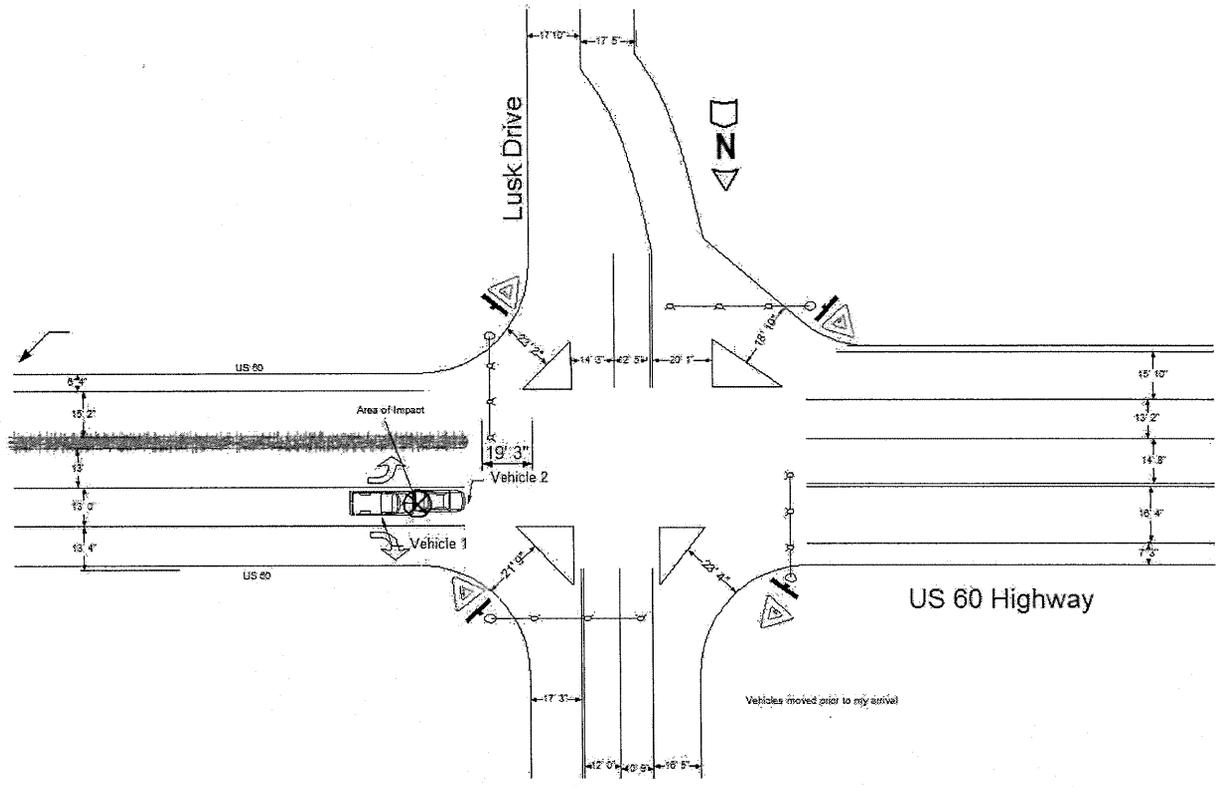
6. COLLISION DIAGRAM

Compass Direction Before Crash Event(s) (Circle One)

V1 NES **W** U V2 NES **W** U V3 NES SW U V4 NES SW U V5 NES SW U V6 NES SW U



INDICATE NORTH



Vehicles moved prior to my arrival

INDICATE ROAD NAMES

DIAGRAM NOT TO SCALE

7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

NO. 7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip): **1 MAXWELL, JASON PAUL ERVIN 13709 STATE HIGHWAY BB - MONETT, MO 65708** PHONE NUMBER: **(417) 540-5013**

DRIVER LICENSE / ID NUMBER: **X152327011** STATE: **MO** LIC STATUS:  Valid  Expired  Susp / Rev / Denied  Disqual CDL  Canceled / Oth Invalid  Unknown

LIC TYPE:  Operator Class **F**  Permit  Unknown (Explain)  CDL Class  MC Only  Interm / Grad  Unlicensed

MC ENDORSEMENT:  Yes  No  NA  Unknown (Explain)

DATE OF BIRTH: **09-25-1996** SEX: **M** SEAT LOC: **FL** INJ: **5** TRANS-PORT: **1** EJECT-ION: **2** AIR BAG: **03** SAFETY DEVICES: **05** VISION OBSTRUCTED:  NA  Not Obstructed  Windshield  Load on Veh  Trees / Brush  Building  Embankment  Sign  Hillcrest  Parked Veh  Moving Veh  Stopped Veh  Glare  Other (Explain)  Unknown (Explain)

PROOF OF INSURANCE:  Yes  No  Not Required INSURANCE COMPANY:  Expired PHONE NO. (Optional): POLICY NUMBER: **3128137-C18-25**  NA  Driver  Vehicle

7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip): **ROBERTS, CRAIG 6670 NASH LN - NEOSHO, MO 64850** PHONE NUMBER:  SAD

YEAR: **1988** MAKE: **Chevrolet** MODEL: **SUBURBAN** COLOR: **BLU** VEH. TYPE: **1** TOTAL NO. OF OCC.: **1**

LICENSE - PLATE NO: **1HR112** STATE: **MO** YEAR: **2016** VIN: **1GNEV16K1JF102984** TOWED FROM SCENE:  Yes  No TOWED DUE TO DIS. DAMAGE:  Yes  No

VEHICLE DAMAGE (Mark all damaged areas):  None / No Damage TOWED BY:  Unknown  NA

INITIAL IMPACT NO.: **1**

2	3	4	5	6	7	18 - Undercarriage	22 - Cargo
1	15	16	17	8	9	19 - Windshield	23 - Unknown
14	13	12	11	10	1	20 - Burned	24 - Other (Explain)
						21 - Towed Unit	

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles  Vehicle Used As Public Conveyance

Passenger Car  Small Bus (9-15 W/Driver)  Motorcycle  Motor Home  Single-unit Truck; 2 axles, 6 tires

Van (< 9 W/Driver)  Large Bus (16+ W/Driver)  ATV  Farm Implements  Single-unit Truck; 3 or more axles

Passenger Van (9+ W/Driver)  School Bus  2 Wh  Construction Equip. Heavy Mach.  Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)

Sport Utility Vehicle  Intercity  3 Wh  Other Vehicle (Code) \_\_\_\_\_

Limousine (7-8 W/Driver)  Transit / Commuter  4 Wh  Cargo Van  Truck Tractor With No Units

Limousine (9-15 W/Driver)  Charter / Tour  5 Wh / More  Pickup  Truck Tractor With One Unit

Motorized Bicycle  Other  Unknown  Other Heavy Truck  Truck Tractor With Two Units

Pedalcycle  To / From School  Unknown (Explain)  Truck Tractor With Three Units

GVW / GCVW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)

Less than or equal to 10,000 lbs.  10,001 - 26,000 lbs.  Greater than 26,000 lbs.  Unknown

EMERGENCY VEHICLE INVOLVEMENT:  NA  Police  Ambulance  Fire  Other (Must check "A" / "B")  A. Emergency Vehicle on Emergency Run  B. Stationary With Emergency Equip. Activated

CONTRIBUTING TRAFFIC CONDITIONS:  NA  Congestion Ahead  Crash Ahead  Other Incident Ahead  Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES:  Additional Codes Listed in Narrative (See Codes in Section 8)

SEQUENCE OF EVENTS CODES: **01 07 34**  Unknown ANIMAL CODE(S): FIXED OBJECT CODE(S): ALCOHOL USE:  No  Yes  Unk  NA

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES:  None

Vehicle Defects (Explain)  Vision Obstructed  Failed To Dim Headlights  Improper Towing / Pushing  Object / Obstruction in Roadway

Speed - Exceeded Limit  Driver Fatigue / Asleep  Failed To Use Lights  Improperly Stopped On Roadway  Distracted / Inattentive (Designate Type)

Too Fast For Conditions  Improper Signal  Following Too Close  Improper Lane Usage / Change  Unknown (Explain)

Violation Signal / Sign  Improper Backing  Wrong Side (Not Passing)  Overcorrected  Other (Explain)

Failed To Yield  Improper Turn  Wrong Side (One-Way)  Improper Riding / Clinging To Veh. Exterior  Failed To Secure Load / Improper Loading

Alcohol  Improper Passing  Physical Impairment (Explain)  Failed To Secure Load / Improper Loading

Drugs  Improperly Parked  Improper Start From Park  Animal(s) In Roadway

DISTRACTED / INATTENTIVE CODE(S):  NA (See Codes in Section 8)

7E. WORK ZONE:  Yes  No  Unknown

TRAFFIC CONTROL:  None  Unknown

Electric:  Green/Yellow/Red  Flashing Red  Flashing Yellow  Ramp Meter  Other (Explain)

Other:  Stop Sign  No Passing Zone  Turn Restricted  Officer / Flagman  Signal On School Bus

Controls:  Warning Sign / Device  Railway Crossing Sign / Device  School Zone  Yield Sign  Other (Explain)

CONTROL MALFUNCTIONING / INOPERATIVE / MISSING:  Yes (Explain)  No  Unknown  NA

7F. OCCUPANTS - NAME (Last, First, MI)	DATE OF BIRTH MM-DD-YYYY	SEX	SEAT LOC	INJ	TRANS-PORT	EJECT-ION	AIR BAG	SAFETY DEVICES	PHONE NUMBER

7G. COMMERCIAL MOTOR VEHICLE:  NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

MOTOR CARRIER IDENTIFICATION (Leasee, etc.) - NAME & ADDRESS (Street, City, State, Zip):  SAO PHONE NUMBER:  SAO

COMMERCIAL / NON-COMMERCIAL:  Interstate Carrier  Intrastate Carrier  Not In Commerce - Government Vehicle  Not In Commerce - Rental Vehicle  Not In Commerce - Other Vehicle MC / MX / ICC NO.: USDOT NO.:

CARGO BODY TYPE:  Enclosed Box  Flatbed  Concrete Mixer  Garbage / Refuse  Pole Trailer  Vehicle Towing Another Veh.  Intermodal Container Chassis  NA (No Cargo Body)  Other  Cargo Tank  Dump  Auto Transporter  Grain / Chip / Gravel  Log

HAZARDOUS MATERIALS: PLACARD DISPLAYED:  Yes  No  Unknown 4-DIGIT NO.: CLASS: HM CARGO PRESENT:  Yes  No  Unknown HM CARGO RELEASED:  Yes  No  Unknown HAZARDOUS MATERIAL NAME:

7 - DRIVERS, VEHICLES, OWNERS, & OCCUPANTS

7A. DRIVER - NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip)
2 STOTTS, HOWARD LEROY 17394 EASTWOOD LN - NEOSHO, MO 64850
PHONE NUMBER (417) 312-7609

DRIVER LICENSE / ID NUMBER T078087001
STATE MO
LIC STATUS [X] Valid [ ] Expired [ ] Susp / Rev / Denied [ ] Disqual CDL [ ] Canceled / Oth Invalid [ ] Unknown
LIC TYPE [X] Operator Class F [ ] Permit [ ] Unknown (Explain)
[ ] CDL Class [ ] MC Only [ ] NA
[ ] Interm / Grad [ ] Unlicensed

DATE OF BIRTH 01-03-1953 SEX M SEAT LOC 5 INJ 1 TRANS-PORT 2 EJECT-TION 03 AIR BAG 05 SAFETY DEVICES 05
VISION OBSTRUCTED [X] Not Obstructed [ ] Trees / Brush [ ] Sign [ ] Moving Veh [ ] Other (Explain)
[ ] Windshield [ ] Building [ ] Hillcrest [ ] Stopped Veh [ ] Unknown (Explain)
[ ] NA [ ] Load on Veh [ ] Embankment [ ] Parked Veh [ ] Glare

PROOF OF INSURANCE [X] Yes [ ] No [ ] Not Required
INSURANCE COMPANY NATIONWIDE [ ] Expired
PHONE NO. (Optional) POLICY NUMBER PPNM0058473428
[ ] Driver [X] Vehicle

7B. VEHICLE - OWNER NAME (Last, First, MI) & ADDRESS (Street, City, State, Zip) [X] SAD
PHONE NUMBER [X] SAD

YEAR 1996 MAKE Toyota MODEL CAMRY COLOR GLD VEH. TYPE 1 TOTAL NO. OF OCC. 1

LICENSE - PLATE NO MK3L8P STATE MO YEAR 2016 VIN 4 T 1 B G 1 2 K 4 T U 8 1 0 9 3 0
TOWED FROM SCENE [ ] Yes [X] No TOWED DUE TO DIS. DAMAGE [ ] Yes [X] No

VEHICLE DAMAGE (Mark all damaged areas) [ ] None / No Damage
INITIAL IMPACT NO 8
18 - Undercarriage 22 - Cargo
19 - Windshield 23 - Unknown
20 - Burned 24 - Other (Explain)
21 - Towed Unit

VEHICLE BODY TYPES - Automobiles / Specialty Vehicles [ ] Vehicle Used As Public Conveyance
[X] Passenger Car [ ] Small Bus (9-15 W/Driver) [ ] Motorcycle [ ] Motor Home [ ] Single-unit Truck; 2 axles, 6 tires
[ ] Van (< 9 W/Driver) [ ] Large Bus (16+ W/Driver) [ ] ATV [ ] Farm Implements [ ] Single-unit Truck; 3 or more axles
[ ] Passenger Van (9+ W/Driver) [ ] School Bus [ ] 2 Wh [ ] Construction Equip. Heavy Mach. [ ] Veh. Pulling Another Unit(s) (Does not apply to Truck Tractors)
[ ] Sport Utility Vehicle [ ] Intercity [ ] 3 Wh [ ] Other Vehicle (Code) [ ] Truck Tractor With No Units
[ ] Limousine (7-8 W/Driver) [ ] Transit / Commuter [ ] 4 Wh [ ] Cargo Van [ ] Truck Tractor With One Unit
[ ] Limousine (9-15 W/Driver) [ ] Charter / Tour [ ] 5 Wh / More [ ] Pickup [ ] Truck Tractor With Two Units
[ ] Motorized Bicycle [ ] Other [ ] Unknown [ ] Other Heavy Truck [ ] Truck Tractor With Three Units
[ ] Pedalcycle [ ] To / From School [ ] Unknown (Explain)
GVW / GCW RATING (Not Licensed Weight) (Pickups, Cargo Vans, All Trucks, Truck Tractors, or Haz Mat Placard Veh. Only)
[ ] Less than or equal to 10,000 lbs.
[ ] 10,001 - 26,000 lbs.
[ ] Greater than 26,000 lbs.
[ ] Unknown

EMERGENCY VEHICLE INVOLVEMENT [X] NA
[ ] Police [ ] Ambulance [ ] A. Emergency Vehicle on Emergency Run
[ ] Fire [ ] Other (Must check "A" / "B") [ ] B. Stationary With Emergency Equip. Activated
CONTRIBUTING TRAFFIC CONDITIONS [X] NA
[ ] Congestion Ahead [ ] Other Incident Ahead
[ ] Crash Ahead [ ] Unknown (Explain)

7C. VEHICLE ACTION / SEQUENCE OF EVENTS CODES [ ] Additional Codes Listed in Narrative (See Codes in Section 8)
SEQUENCE OF EVENTS CODES 01 08 34 [ ] Unknown
ALCOHOL USE [X] No [ ] Yes [ ] Unk [ ] NA

7D. PROBABLE CONTRIBUTING CIRCUMSTANCES [X] None
[ ] Vehicle Defects (Explain) [ ] Vision Obstructed [ ] Failed To Dim Headlights [ ] Improper Towing / Pushing [ ] Object / Obstruction in Roadway
[ ] Speed - Exceeded Limit [ ] Driver Fatigue / Asleep [ ] Failed To Use Lights [ ] Improperly Stopped On Roadway [ ] Distracted / Inattentive (Designate Type)
[ ] Too Fast For Conditions [ ] Improper Signal [ ] Following Too Close [ ] Improper Lane Usage / Change [ ] Unknown (Explain)
[ ] Violation Signal / Sign [ ] Improper Backing [ ] Wrong Side (Not Passing) [ ] Overcorrected [ ] Other (Explain)
[ ] Failed To Yield [ ] Improper Turn [ ] Wrong Side (One-Way) [ ] Improper Riding / Clinging To Veh. Exterior
[ ] Alcohol [ ] Improper Passing [ ] Physical Impairment (Explain) [ ] Failed To Secure Load / Improper Loading
[ ] Drugs [ ] Improperly Parked [ ] Improper Start From Park [ ] Animal(s) In Roadway
DISTRACTED / INATTENTIVE CODE(S) [X] NA (See Codes in Section 8)

7E. WORK ZONE [ ] Yes [X] No [ ] Unknown
TRAFFIC CONTROL [ ] None [ ] Unknown
Electric: [X] Green/Yellow/Red [ ] Flashing Red [ ] Flashing Yellow [ ] Ramp Meter [ ] Other (Explain)
Other: [ ] Stop Sign [ ] No Passing Zone [ ] Turn Restricted [ ] Officer / Flagman [ ] Signal On School Bus
Controls: [ ] Warning Sign / Device [ ] Railway Crossing Sign / Device [ ] School Zone [ ] Yield Sign [ ] Other (Explain)
CONTROL MALFUNCTIONING / INOPERATIVE / MISSING [ ] Yes (Explain) [X] No [ ] Unknown [ ] NA

7F. OCCUPANTS - NAME (Last, First, MI) ADDRESS (Street, City, State, Zip) DATE OF BIRTH MM-DD-YYYY SEX SEAT LOC INJ TRANS-PORT EJECT-TION AIR BAG SAFETY DEVICES PHONE NUMBER

7G. COMMERCIAL MOTOR VEHICLE [X] NA Required on vehicle if "Yes" was answered to questions in parts 1 and 2 in CMV involvement criteria and vehicle meets one of the three criteria in part 2.

MOTOR CARRIER IDENTIFICATION (Lease, etc.) - NAME & ADDRESS (Street, City, State, Zip) [ ] SAO
PHONE NUMBER [ ] SAO

COMMERCIAL / NON-COMMERCIAL [ ] Interstate Carrier [ ] Intrastate Carrier [ ] Not In Commerce - Government Vehicle [ ] Not In Commerce - Rental Vehicle [ ] Not In Commerce - Other Vehicle
MC / MX / ICC NO. USDOT NO.

CARGO BODY TYPE [ ] Enclosed Box [ ] Flatbed [ ] Concrete Mixer [ ] Garbage / Refuse [ ] Pole Trailer [ ] Vehicle Towing Another Veh. [ ] Intermodal Container Chassis [ ] NA (No Cargo Body) [ ] Other [ ] Unknown
[ ] Cargo Tank [ ] Dump [ ] Auto Transporter [ ] Grain / Chip / Gravel [ ] Log

HAZARDOUS MATERIALS PLACARD DISPLAYED [ ] Yes [ ] No [ ] Unknown
4-DIGIT NO. CLASS HM CARGO PRESENT [ ] Yes [ ] No [ ] Unknown
HM CARGO RELEASED [ ] Yes [ ] No [ ] Unknown
HAZARDOUS MATERIAL NAME

SEAT LOCATION		INJURY		TRANSPORTED	EJECTION	AIR BAG		SAFETY DEVICES	
XX - Not Known	FR SR TR	1. Fatal	19. Airborne	(For Medical Treatment)		1. None / NA	9. Deployed -	1. None	10. Booster Seat
B - Pedalcycle	FC SC TC	2. Disabling	20. Ran Off Roadway - Right		1. NA	3. Not Deployed	Combination	2. Not Used	11. Child Restraint - Forward Facing
M - Motorcycle	FL SL TL	3. Evident -	21. Ran Off Roadway - Left		2. No	4. Removed	10. Deployment	3. Shoulder Belt Only	12. Child Restraint - Rear Facing
CP - Commercial Passenger		Not Disabling	22. Overturn / Rollover		3. Partially	5. Deployed - Front	Unknown	4. Lap Belt Only	13. Other Helmet
OE - Occupant - Enclosed Load Area		4. Probable -	23. Fire / Explosion		4. Totally	6. Deployed - Side	U. Air Bag Presence	5. Shoulder and Lap Belt	14. Reflective Clothing
OU - Occupant - Unenclosed Load Area		Not Apparent	24. Immersion		U. Unknown	7. Deployed - Curtain	Unknown	7. DOT Compliant	15. Other
RC - Rail Crew		5. None Apparent	25. Jackknife			8. Deployed - Other		MC Helmet	U. Use Unknown
SV - Other (Explain in Narrative)		U. Unknown	26. Cargo Loss / Shift			(Knee, Air Belt, etc.)		8. No Helmet	N. Not Applicable
NA - Not Applicable		N. NA	27. Equipment Failure						

VEHICLE ACTION / SEQUENCE OF EVENTS (Items with double-asterisk [**] require additional coding)									
1. Going Straight	10. Start From Parked	19. Airborne	28. Separation Of Units	37. Collision Inv. Other Object (Explain)	44. Thrown/Falling Object				
2. Overtaking	11. Backing	20. Ran Off Roadway - Right	29. Returned To Roadway	38. Other Non-collision	45. Struck By Falling, Shifting Cargo,				
3. Making Right Turn	12. Stopped In Traffic	21. Ran Off Roadway - Left	30. Collision Inv. Pedestrian	39. Collision Inv. Bicycle/Pedalcycle	Object Set In Motion By Own MV				
4. Right Turn on Red	13. Parked	22. Overturn / Rollover	31. Collision Inv. Bicycle/Pedalcycle	In Bicycle Lane	46. Ran Off Roadway - Other (Explain)				
5. Making Left Turn	14. Changing Lanes	23. Fire / Explosion	32. Collision Inv. Railway Veh.	40. Collision Inv. Animal Drawn Vehicle /	47. Cross Separator				
6. Making U-Turn	15. Avoiding	24. Immersion	33. Collision Inv. Animal (**)	Animal Ridden For Transportation					
7. Skidding / Sliding	16. Cross Median	25. Jackknife	34. Collision Inv. MV in Transport	41. Collision Inv. Working MV					
8. Slowing / Stopping	17. Cross Center Of Road	26. Cargo Loss / Shift	35. Collision Inv. Parked MV	42. Downhill Runaway					
9. Start In Traffic	18. Cross Road	27. Equipment Failure	36. Collision Inv. Fixed Object (**)	43. Fell/Jumped From MV					

ANIMAL CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS				
60. Deer	61. Farm Animal	62. Dog	63. Other Animal	U. Unknown

FIXED OBJECT CODES FOR VEHICLE ACTION / SEQUENCE OF EVENTS				
20. Tree / Stump (Standing)	26. Culvert	32. Building	38. Bridge Rail	44. Wall
21. Embankment / Driveway / Ground / Rock Bluff	27. Highway Traffic Sign Post / Support	33. Traffic Signal Support	39. Guardrail End	45. Cable Barrier
22. Guardrail Face	28. Bridge Pier / Abutment / Support	34. Impact Attenuator / Crash Cushion	40. Other Traffic Barrier	46. Bridge Overhead Structure
23. Utility Pole	29. Curb	35. Fire Hydrant	41. Overhead Sign Support	47. Overhead Line / Cable
24. Fence	30. Mail Box	36. Other (Explain)	42. Ditch	U. Unknown
25. Street Light Support	31. Concrete Traffic Barrier	37. Bridge Parapet End	43. Other Post / Pole / Support	

DISTRACTED / INATTENTIVE CODES				
1. External Distraction	5. Communication Device - Hand-held	9. Eating / Drinking	13. Computer Equipment / Electronic Games / etc.	
2. Passengers	6. Communication Device - Hands Free	10. Reading	14. Adjusting Vehicle Controls	
3. Stereo / Audio / Video Equipment	7. Communication Device - Texting / E-mailing	11. Tobacco Use	15. Other (Explain)	
4. Navigation Device	8. Communication Device - Web Browsing	12. Grooming		

VEHICLE TYPE CODES				
1. Motor Vehicle In Transport	3. Working Motor Vehicle	5. Animal Drawn Vehicle / Animal Ridden For Transport Purposes		
2. Parked Motor Vehicle	4. Pedalcycle	U. Unknown		

OTHER VEHICLE CODES				
1. Riding Mower / Garden Tractor	3. Snowmobile	5. Animal Drawn Vehicle / Animal Ridden For Transportation	6. Low Speed Vehicle	
2. Golf Cart	4. Forklift		7. Other (Explain)	

9. NARRATIVE / STATEMENTS (If additional room is necessary, use Section 11 - Narrative / Statements Continuation)

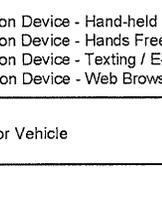
Prior to my arrival to the intersection of Highway 60 and Lusk Drive. Central Dispatch Center (CDC) advised the partys involved in the crash had pulled off the roadway onto the shoulder.

Upon my arrival, I observed a blue Chevrolet Suburban with Missouri registration #1HR112, this vehicle is vehicle one (V1). In front of V1 was a gold Toyota Camry with Missouri registration #SM9L8X, this vehicle is vehicle 2 (V2). V2 had rear end damage and V1 had front end damage.

I spoke with both of the drivers involved and asked if they were in need of medical attention. They both declined any medical attention.

I spoke with the driver of V1, identified by his Missouri driver license as Jason Maxwell. Mr. Maxwell stated he was following V2 west on Highway 60. He said as they approached the intersection the stop light turned yellow and V2 went to stop. He said he tried to stop but his tires locked up and he slid into V2.

I spoke with the driver of V2, identified by his Missouri driver license as Howard Stotts. He stated as he approached the intersection on Highway 60 and Lusk Drive, the stop light turned yellow. He said he went to stop at the intersection and he was struck in the rear end by V1 which caused damage to his vehicle.

10. REPORTING AND REVIEWING OFFICER INFORMATION				
REPORTING OFFICER NAME	DSN / BADGE NO.	BEAT / ZONE	TROOP / DISTRICT / PRECINCT	
PII JOHN MILLER 	119	CR	NSW	
REVIEWING OFFICER NAME	DSN / BADGE NO.	REVIEWING OFFICER 2 NAME	DSN / BADGE NO.	
